

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/585494

FILING DATE

02 APR 2009

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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48		/				
49		/				
50	/					
TOTAL IND.	6					
TOTAL DEP.	54					
TOTAL CLAIMS	60					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		/				
52	/					
53		/				
54		/				
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						